

FEE TRANSMITTAL

Electronic Version v09

Stylesheet Version v08.0

Title of Invention	Dual View Endoscope																						
Application Number :																							
Date :																							
First Named Applicant:		Dr. Nitesh Ratnakar																					
Attorney Docket Number:																							
TOTAL FEE AUTHORIZED \$ 954																							
Patent fees are subject to annual revisions on or about October 1st of each year.																							
Filing as small entity																							
BASIC FILING FEE																							
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>395</td><td>395</td></tr><tr><td colspan="4" style="text-align: right;">Subtotal For Basic Filing Fees: \$ 395</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	395	395	Subtotal For Basic Filing Fees: \$ 395											
Fee Description	Fee Code	Amount \$	Fee Paid \$																				
Utility Filing Fee	2001	395	395																				
Subtotal For Basic Filing Fees: \$ 395																							
EXTRA CLAIM FEES																							
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 39</td><td>19</td><td>2202</td><td>9</td><td>171</td></tr><tr><td>Independent Claims : 5</td><td>2</td><td>2201</td><td>44</td><td>88</td></tr><tr><td colspan="5" style="text-align: right;">Subtotal For Extra Claims Fees: \$ 259</td></tr></tbody></table>				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 39	19	2202	9	171	Independent Claims : 5	2	2201	44	88	Subtotal For Extra Claims Fees: \$ 259				
Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$																			
Total Claims : 39	19	2202	9	171																			
Independent Claims : 5	2	2201	44	88																			
Subtotal For Extra Claims Fees: \$ 259																							
PRE GRANT PUBLICATIONS FEES																							
<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Publication Fee For Early or Voluntary Publication</td><td>1504</td><td>300</td><td>300</td></tr><tr><td colspan="4" style="text-align: right;">Subtotal For Additional Fees: \$300</td></tr></tbody></table>				Fee Description	Fee Code	Amount \$	Fee Paid \$	Publication Fee For Early or Voluntary Publication	1504	300	300	Subtotal For Additional Fees: \$300											
Fee Description	Fee Code	Amount \$	Fee Paid \$																				
Publication Fee For Early or Voluntary Publication	1504	300	300																				
Subtotal For Additional Fees: \$300																							
AUTHORIZED BILLING INFORMATION																							
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																							
Credit account number:		9620																					
Expiration Date (YYYYMMDD):		2006-07-31																					
Authorized name:		Nitesh Ratnakar																					
Billing address:		53154																					